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4/5/2004

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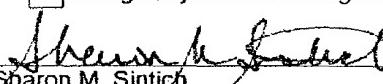
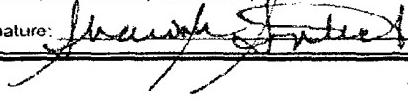
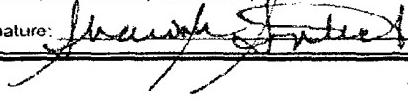
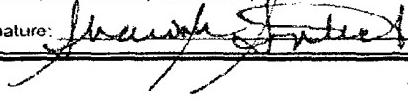
(703) 872-9306

FROM: Sharon M. Sintich

PAGES (INCLUDING THIS PAGE): 11

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AMENDMENT TRANSMITTAL LETTER				Docket No. 29915/6280NCP			
Application No. 09/668,314	Filing Date September 22, 2000	Examiner C. Nichols	Art Unit 1647				
Applicant(s): Mark E. Gurney et al.							
Invention: ALZHEIMER'S DISEASE SECRETASE, APP SUBSTRATES THEREFOR, AND USES THEREFOR							
TO THE COMMISSIONER FOR PATENTS							
Transmitted herewith is an amendment in the above-identified application.							
The fee has been calculated and is transmitted as shown below.							
CLAIMS AS AMENDED							
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate			
Total Claims	50	- 77 =		x 0.00			
Independent Claims	9	- 10 =		x 0.00			
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>							
Other fee (please specify):							
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:				0.00			
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity <input checked="" type="checkbox"/> No additional fee is required for this amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed. <input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>13-2855</u> as described below. A duplicate copy of this sheet is enclosed. <input type="checkbox"/> Credit any overpayment. <input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.							
 Dated: April 5, 2004 Sharon M. Sintich Attorney Reg. No.: 48,484							
<p>MARSHALL, GERSTEIN & BORUN LLP 233 S. Wacker Drive, Suite 6300 Sears Tower Chicago, Illinois 60606-6357 (312) 474-6631</p>							
<p>Certificate of Facsimile Transmission I hereby certify that this paper and papers referred to as being attached, are being transmitted via facsimile (Fax No. 703-872-9306) to the Commissioner for Patents, Alexandria, VA. 22313, on</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">Dated: April 5, 2004</td> <td style="width: 30%;">Signature: </td> <td style="width: 40%;">(Sharon M. Sintich)</td> </tr> </table>					Dated: April 5, 2004	Signature: 	(Sharon M. Sintich)
Dated: April 5, 2004	Signature: 	(Sharon M. Sintich)					

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Signature:



(Sharon M. Sintich)

Docket No.: 29915/6280NCP
(PATENT)

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Mark E. Gurney et al.

Application No.: 09/668,314

Art Unit: 1647

Filed: September 22, 2000

Examiner: C. Nichols

For: ALZHEIMER'S DISEASE SECRETASE, APP
SUBSTRATES THEREFOR, AND USES
THEREFOR

AMENDMENT

MS Non-Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Please amend the above-identified U.S. patent application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 9 of this paper.